

## ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

**Harrison County Hospital**City: Corydon County: Harrison Year: **2003**

Provider Type: General Acute

<b>I. Inpatient Care</b>				
<b>Hospital Service Description</b>	<b>Number of Set Up Beds</b>	<b>Number of Discharges</b>	<b>Number of Patient Days</b>	<b>Average Charge Per Discharge</b>
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	5	77	575	\$11,367
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	35	1,326	4,813	\$2,708
Neonatal Intermed	0	0	0	\$0
Obstetrics	8	257	630	\$2,241
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	48	1,660	6,018	NA
Normal Newborn	8	206	502	\$1,282

<b>II. Outpatient Visits</b>			
Circulatory System	3,822	Digestive System	1,528
Endocrine System	3,479	Injuries and Poison	5,292
Mental Disorder	615	Musculoskeletal	4,812
Neoplasms	960	Nervous	1,509
Respiratory	1,924	Urinary	1,592
Other/Unknown	11,477	Total Visits	37,010
Number of Visits to Emergency Department			10,336
Percent of Emergency Department Visits of Total Visits			27.9%

# Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

N - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
N - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	Y - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	Y - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	N - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	N - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	N - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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